

# PROVIDER BULLETIN

No. 15-60

Date: December 16, 2015

TO: All Medicaid Providers

FROM: Calder Lynch, Director  
Division of Medicaid & Long-Term Care



BY: Leah Spencer, Program Specialist, RN

RE: Billing Instructions for Physician Based Services and Outpatient Hospital/Facility  
Reporting of National Drug Codes (NDCs)

**Please share this information with administrative, clinical, and billing staff.**

The purpose of this provider bulletin is to update the billing instructions for physician clinics and hospital providers who are required to submit NDCs on claims. This bulletin applies to claims for services provided to fee-for-service clients.

Federal regulations require state Medicaid agencies to collect rebates on physician-administered drugs, and all claims must include NDCs for those drugs. National Drug Codes are unique numbers which universally identify and report drug products. Currently, providers are able to add multiple NDCs to a claim line when billing Nebraska Medicaid. To make the rebate process more efficient, **effective immediately**, Nebraska Medicaid will require that only one NDC with a single CPT or HCPCS code be added on each line of a claims submission. Billing instructions are found at Nebraska Administrative Code 471-000-62.

For questions on this provider bulletin, you may contact Leah Spencer, Program Specialist, at 402-471-9368 or via email at: [DHHS.MLTCPHysicalhealth@nebraska.gov](mailto:DHHS.MLTCPHysicalhealth@nebraska.gov).